Form #2204 Rev. 10/2011

Submit to: SECRETARY OF STATE **Government Filings Section** P O Box 12887 Austin, TX 78711-2887 512-463-6334



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OATH OF OFFICE

Filing Fee: None	
IN THE NAME AND BY THE AUTHO	ORITY OF THE STATE OF TEXAS
I, Will Metcalf	ethological (A. C.) Application of the control of t
execute the duties of the office of State I	, do solemnly swear (or affirm), that I will faithfully Representative. District 16 of
	my ability preserve, protect, and defend the Constitution and laws
of the United States and of this State, so h	
of the Officed States and of this State, so i	leip me dod.
	Dillen
	Signature of Officer
	Signature of Officer
	V
State of Texas	
County of Travis	
*	
Sworn to and subscribed before me	104
this	19th day of November , 20 14.
THE CO	Co R. Willett
STATE OF Z	
	Signature of Notary Public or Other Officer
	Administering Oath
	DON Willott, Towns Supreme Court Just
IS IS TO THE STATE OF THE STATE	